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UNFPA

UNITED NATIONS POPULATION FUND
PROPOSED PROJECTS AND PROGRAMMES

Recommendation by the Executive Director
Assistance to the Government of Nepal
Support for a comprehensive population programme

Proposed UNFPA assistance:	$19 million, of which $15 million would be programmed from UNFPA regular resources. UNFPA would seek to provide the balance of $4 million from a combination of UNFPA regular resources and other resources, including multi-bilateral resources, when and to the extent such additional resources become available.
Estimated value of the Government's contribution:	To be determined
Duration:	Five years
Estimated starting date:	July 1992
Executing agencies:	Government of Nepal United Nations and United Nations organizations and agencies National and international non-governmental organizations (NGOs)
Government coordinating agency:	National Planning Commission

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NEPAL

Demographic facts

Population Total (000)	
Total	19,143
Males	9,825
Females	9,318
Sex ratio (/100 females)	105.4
Urban	1,837
Rural	17,307
Per cent urban	9.6
Population in year 2000 (000)	24,084
Functional age groups (%)	
Young child: 0-4	16.1
Child: 5-14	26.1
Youth: 15-24	18.6
Elderly: 60+	5.1
65+	3.1
Women: 15-49	23.0
Median age (years)	18.8
Dependency ratios: total	82.8
(/100) Aged 0-14	77.1
Aged 65+	5.7
Agricultural population density (/hectare of arable land)	7.19
Population density (/sq. km.)	136
Average annual change (000)	
Population increase	476
Births	738
Deaths	263
Net migration	0
Annual population total (% growth)	2.34
Urban	6.48
Rural	1.85
Crude birth rate (/1000)	36.3
Crude death rate (/1000)	12.9
Net migration rate (/1000)	0.0
Total fertility rate (/woman)	5.53
Gross reproduction rate (/woman)	2.70
Net reproduction rate (/woman)	2.01
Infant mortality rate (/1000)	118
Life expectancy at birth (years)	
Males	54.0
Females	53.0
Both sexes	53.5
GNP per capita (U.S. dollars, 1989)	180

Sources: Population density on arable land is derived from two publications issued by the Food and Agriculture Organization of the United Nations: FAO Production Yearbook 1985 and World-wide Estimates and Projections of Agricultural and Non-Agricultural Population Segments 1950-2025, ESS/MIS/86/2; gross national product per capita: World Bank, World Development Report 1991. Figures for population, total population by sex, population by age group, age indicators, urban-rural population, and population density (/sq. km.) refer to the year 1990; figures for average annual change, rate of annual change, and fertility and mortality are the five-year averages for 1990-1995. These data are from the Population Division, Department of International Economic and Social Affairs of the United Nations, World population prospects: 1990.

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I. SUMMARY

1. The United Nations Population Fund (UNFPA) proposes to support a comprehensive population programme in the amount of $19 million, of which $15 million would be programmed from UNFPA's regular resources, over a five-year period, starting July 1992, to assist the Government of Nepal in achieving its population and development objectives. UNFPA would seek to provide the balance of $4 million from a combination of UNFPA regular resources and other resources, including multi-bilateral resources, when and to the extent such additional resources become available. The proposed programme period would coincide with the Government's eighth five-year development plan and with the programming cycle of the United Nations Development Plan (UNDP) and the United Nations Children's Fund (UNICEF).

2. The proposed programme is based on: (a) the Government's priorities, particularly those elaborated in the Preliminary National Population Policy of 1991 and the 1991 National Health Policy; (b) findings and recommendations of the UNFPA Programme Review and Strategy Development (PRSD) mission; and (c) extensive, in-depth discussions with senior officials of the National Planning Commission and its Population Division, the Ministries of Health and Education and other concerned sectoral Ministries, Tribhuvan University, agencies of the United Nations system, bilateral assistance agencies, the Asian Development Bank, the World Bank and non-governmental organizations (NGOs) active in the field of population and health in Nepal. The proposed programme is designed to fit within the Government's overall population strategy and is intended to complement and supplement national population activities.

3. The objectives of the proposed UNFPA programme are to build up the national capacity for: (a) delivering efficient and effective maternal and child health and family planning (MCH/FP) services; (b) consolidating and expanding the reach of the population information, education and communication (IEC) programme; (c) institutionalizing formal and non-formal population education; (d) collecting, analysing and disseminating population data; (e) analysing and implementing population policy; (f) mainstreaming women into development activities; and (g) promoting research on the interrelationship between population and the environment.

4. All projects under the proposed programme, as in all UNFPA-assisted programmes, would be undertaken in accordance with the principles and objectives of the World Population Plan of Action; that is, that population policies should be consistent with internationally and nationally recognized human rights of individual freedom, justice and the survival of national, regional and minority groups (para. 14 (d)); that respect for human life is basic to all human societies (para. 14 (e)); and that all couples and individuals have the basic right to decide freely and responsibly the number and spacing of their children and to have the information, education and means to do so (para. 14 (f)).

II. BACKGROUND

5. Demographic trends. The population of Nepal has nearly doubled during the last 30 years, increasing from 9.4 million in 1960 to 19.1 million in 1990. Even if the country is able to reduce the total fertility rate (TFR) to 4.0 from its current rate of 5.5, it is estimated that the population would reach 23 million by the year 2015. It may double again by the year 2045. The infant mortality rate (IMR) is 118 per 1,000 live births, and the child mortality rate is 197 per 1,000 live births. The maternal mortality rate (MMR) is 8.50 per 1,000 live births -- one of the highest mortality rates in the subcontinent. Life expectancy is 54 years. Contraceptive prevalence is relatively low, at 22 per cent (1991). There is a great potential for population growth built into

the age structure because approximately 42 per cent of the population are below 15 years of age, and approximately 47 per cent of the total female population are in the reproductive ages of 15 to 49.

6. Social and economic factors. Despite financial and other constraints, expenditures on health have been increasing since the early 1980s. The number of hospitals increased from 73 in 1980 to 123 in 1990, and the number of health posts from 586 in 1980 to 816 in 1990. However, health services are still inadequate and accessibility is limited, hindering improvements in the population's health, and especially that of women and children. Gender differentials in child mortality, education, access to resources and decision-making processes remain wide. The overall literacy rate is very low -- 33 per cent -- and for women it is 13 per cent. Due to early marriages (at age 16 with parental consent) and frequent and unspaced pregnancies, there is a large group of high-risk women. Moreover, the 1986 Nepal Fertility and Family Planning Survey indicates an extensive unmet need for family planning services: 59 per cent of married women of reproductive age stated that they wanted no more children. Notwithstanding regional variations in the status of women, age at marriage, completed fertility, etc., the overall health, education and economic status of Nepali women is among the lowest in the region. Low literacy, low status of women, early marriage, and the social and economic value of children (given the demand for child labour) constitute the main determinants of fertility.

7. With its limited resource base, stagnant economy and high population growth rate, Nepal has been identified as one of the poorest countries in the region. The gross national product (GNP) per capita is estimated at $180. At the present rate of population increase, it has been estimated that the investment needed to provide for an additional 500,000 persons each year exceeds the Government's total annual revenues. Agriculture contributes 60 per cent to the GNP, yet the average size of landholdings is 0.19 hectare per capita. Two thirds or more of the rural population spend more than 70 per cent of their income on food. On marginal farms in the hills, two thirds of a farmer's time is spent in off-farm work to make ends meet. Labour statistics on women's participation, though scanty and underreported, indicate that, in 1981, female employment was estimated to be only 35 per cent. Of these women, 95.7 per cent were engaged in agriculture. Even though off-farm employment has increased, women have been unable to take advantage of these new opportunities due to socio-economic and cultural barriers. Environmental degradation and the migration of husbands have adversely affected women and girls. Natural resources, such as forests, are diminishing mainly due to exploitation by the growing population. In turn, flooding, landslides, soil erosion and decreased agricultural output have followed.

8. The Government has acknowledged that population growth and unbalanced population distribution seriously inhibit development.The recently drafted population policy which is awaiting official adoption seeks to bring about a balance between the population, socio-economic development and the environment, and proposes implementation of the population programme as part of His Majesty's Government's poverty-alleviation programme. The Government's commitment to population issues has also been manifested in the formation of the National Committee on Population, chaired by the Prime Minister.

III. REVIEW OF UNFPA AND OTHER ASSISTANCE TO DATE

9. UNFPA's assistance to Nepal's population programme began in 1970. Between 1970 and 1979, expenditures totalled $5.3 million, and during the first country programme (1980-1987) expenditures reached over $17 million. In the framework of the first programme, the Governments of Finland, the Netherlands and Norway provided multi-bilateral assistance in MCH/FP, population IEC and population data collection and analysis. The first country programme contributed to: (a) the availability and increase of MCH/FP services;

(b) the introduction of population education into the regular programmes of sectoral ministries; (c) IEC activities in support of family planning and MCH; (d) expansion of the population database; (e) the development of the National Plan of Action for Women in Development; and (f) the promotion of women's participation in an agricultural extension programme.

10. The Governing Council approved $9 million for the second country programme for the period from July 1988 to July 1991. Due to internal political changes in 1990-1991 and the postponement of adoption of the Eighth Five-Year Plan, the programme has been extended to June 1992. The approved amount has been allocated in its entirety. The programme emphasized MCH care and family planning and data collection and analysis, and also supports activities in IEC, population dynamics, and women, population and development.

Maternal and child health and family planning

11. In support of the Government's MCH/FP programme, UNFPA provided assistance for delivering MCH/FP services and strengthening health networks through community participation in selected districts and the establishment of Regional Training Centres. Health services, including MCH/FP, are now being provided through hospitals, health posts and outreach networks. Family planning has been recognized as a part of the MCH services. Efforts were made to ensure quality through training, counselling, medical screening and site certification. Community-based outreach services have been implemented in remote villages in 28 districts where the Female Community Health Volunteers programme was launched. Provisions were made for contraceptives, the development of a family planning clinical training curriculum and training materials, and MCH drugs and equipment. Physicians and senior paramedical staff have been trained in Norplant insertion and removal. Norplant services are currently being provided in 21 hospitals. A total of 575 Auxiliary Nurse Midwives and Auxiliary Health Workers have been trained to administer injectable contraceptives, which are being provided in 400 of the 816 health posts. Management Information System (MIS) tools, such as report forms for service statistics and inventory, have been introduced in all 75 districts. To date, 9,800 female community volunteers have been trained in MCH/FP IEC. More than 4,500 Village Health Workers, 2,765 primary school teachers and 294 District Public Health Office and Health Post staff received basic and refresher training in primary health care, including MCH/FP. The Village Health Worker curriculum and manuals have been revised and improved. Trainers in the Regional Training Centres have been trained in programme management.

12. Despite the foregoing achievements, the programme experienced several constraints. According to the findings of the PRSD Mission and South Asian Study, there was limited availability of clinical family planning services. More community-based health facilities were needed, and the outreach programme needed to be strengthened, with more workers -- particularly women. More than 90 per cent of family planning service providers at the grass-roots level were males, and, because of socio-cultural communication patterns, they had difficulty in effectively conveying MCH/FP messages. Managerial problems included overcentralized health programme management and implementation. A clearly defined policy on the priority of family planning and its integration within the Ministry of Health was lacking. Other constraints included problems in distributing MCH/FP supplies; overemphasis on permanent contraceptive methods and dependence on a few methods rather than a wide range of contraceptive methods; and inadequate family planning counselling. Although estimates of method-specific contraceptive effectiveness are not yet available, if the method mix had been more balanced, a higher CPR might have been achieved. The emphasis on permanent methods (86 per cent) reached couples that already had at least four children.

Information, education and communication

13. In line with the 1983 National Population Strategy, UNFPA supported the introduction of population education into the formal education system. Through UNFPA's first and second cycles of assistance, population education at certificate and bachelor levels was introduced into Tribhuvan University. Major activities in this area included the following: (a) integration of population education content into textbooks; (b) training of teachers and administrators as well as training of project personnel in management and monitoring; (c) development and production of certificate- and bachelor-level textbooks at the University, and updating of the population education source book; and (d) integration of population education content into literacy materials. Moreover, training manuals for primary and secondary school teachers were prepared, and training materials were developed and updated.

14. Despite the above attainments, the recommendation of the 1983 National Commission on Population that population education should be compulsory in formal and non-formal education has not yet been achieved. Population education was only an optional subject in 8 out of 1,638 secondary schools. Major constraints included insufficient research, evaluation and monitoring for improving population education programmes; the absence of population education in primary schools; and the shortage of teachers trained in population education.

15. In non-formal IEC, support was rendered to strengthen the Population Information Centre within the former National Commission on Population. Major activities included fellowships abroad and in-country training in using population data in policy formulation and programme development. In addition, family planning posters and calendars as well as radio and television "spot" announcements and programmes were produced. Four regional-level workshops were organized, in which District Public Health Officers designed a work plan for district-level IEC activities. A total of 230 programme administrators were oriented in using population data and information. A Status Report on Population and Development was published. In addition, the institutionalization of non-formal population education was initiated within the Ministry of Education.

16. Despite progress in institutionalizing population education in the non-formal sector, major constraints were experienced, among them, according to the 1991 PRSD Mission and the 1989 South Asian Study on Nepal, the lack of a national IEC strategy and inadequate use of population data, with no database on which inferences could be drawn concerning the impact of family planning. More socio-cultural research and analysis were needed for IEC programme implementation. They also identify an overemphasis on audio-visual and print media and underemphasis on interpersonal communications as a problem. Moreover, the system of distributing IEC materials needs to be improved, as does the coordination of IEC production units. In addition, the Government's literacy programme has been limited, thus contributing to the lack of motivation of adult women to take advantage of family planning programmes.

Data collection and analysis

17. To help the Government develop and upgrade the national capacity for producing continuous series of reliable and timely demographic data, UNFPA supported the 1981 population and housing census, the 1986 Fertility, Family Planning and Health Status Survey (FFPHSS). Currently, the 1991 Population and Housing Census and 1991 FFPHSS are being financed with UNFPA funding. The census enumeration exercise was

completed, and preliminary results were published. The post-enumeration exercise is under way. The FFPHSS results are expected to provide estimates on fertility and family planning variables at the district level.

18. Among the major constraints to effective population data collection, analysis and dissemination were the absence of a central authority to coordinate population research, and the shortage of professionals trained in collecting and analysing census and inter-censal data. For these reasons, there was less continuity in population data analysis and utilization than was desirable.

Population dynamics

19. To help build up national expertise in population dynamics, UNFPA supported the establishment in Tribhuvan University of the Central Department of Population Studies, which has offered demographic training at the master's-degree level since June 1990. The Department aims at annually producing 10-15 master of arts degree-holders in demography and upgrading the population knowledge of 20-30 government officials. Demographic training is now being given to 45 graduate students by six full-time faculty members. The two Nepalese who are pursuing their Ph.D. degrees abroad are expected to join the Department at the completion of their programme in early 1993. In addition to training, the Department has carried out about seven population-related research studies.

20. The demand for enrolment has outpaced the Department's capacity. Despite an impressive beginning, the Department suffers from shortages of funding for policy-related research and for fellowships abroad. University authorities also acknowledge the need to include population and development issues and to incorporate the topics of women and the environment into the curriculum, which has thus far concentrated on technical demography.

Women, population and development

21. With a view to increasing awareness of the linkages between women's health and family planning, UNFPA supported, through the Nepal Women's Organization, the introduction of MCH/FP education in the activities of 30 multi-purpose skill development centres. Assistance was also provided for training workshops and seminars to improve the management capability of the Women's Services Co-ordination Committee. Furthermore, MCH/FP and family welfare education have been introduced into a credit scheme established for rural women.

22. Project achievements have been limited, however. Since 1990, when both the Nepal Women's Organization and the Women's Services Co-ordination Committee were dissolved, there has been an institutional void, with no central mechanism for carrying out, coordinating and integrating activities addressing women, population and development issues. Along with the absence of institutional mechanisms to mainstream women's concerns, weak monitoring and evaluation of women's programmes, and the absence an explicit strategy and of a gender-based population and socio-economic database have been identified as major constraints.

Other external assistance

23. Major external assistance comes from the United Nations Children's Fund (UNICEF), the World Health Organization (WHO), and bilateral aid agencies such as the Japan International Cooperation Agency, the Swiss Development Cooperation and the United States Agency for International Development (USAID).

UNICEF's five-year commitment, to begin in 1992, is for approximately $65 million. The programme includes training health personnel and volunteers, strengthening referral facilities for difficult MCH and family planning cases, supplying essential MCH drugs, promoting Safe Motherhood and MCH/FP, developing curricula and textbooks, promoting adult literacy and encouraging community organizations, particularly women's groups. WHO assists research for the promotion of national health management, health manpower development, disease control and prevention, health information systems, and drug supply and logistics systems. WHO funding is approximately $6 million for two years. The United Nations Development Programme (UNDP) provided assistance to develop management systems for health services delivery at regional and district levels, and to increase the effectiveness of health services delivery as part of primary health care. USAID's total financial assistance for 1980-1990 was $37.2 million; the 1990-1995 USAID-supported programme has total funding of $20 million. USAID supports decentralizing and improving organization of the infrastructure to maximize coverage of health services.

24. Some international non-governmental organizations, such as Save the Children, are active in the field of health and population, including MCH/FP, in limited geographical areas. The International Planned Parenthood Federation (IPPF) has supported the Family Planning Association of Nepal (FPAN) since 1959. FPAN has focused on MCH/FP service delivery, IEC training and integrated community development, including family planning education and related health components. FPAN's annual expenditures are $800,000.

IV. PROPOSED PROGRAMME, 1992-1997

25. Overcoming the major population and development constraints and meeting the challenges for effective policy implementation will require concerted national and international efforts. The proposed programme aims, therefore, at supplementing and complementing national endeavours. The Government's population and development objective is to balance Nepal's population growth rate with its resource base and economic growth potential. The main thrust of Nepal's Eighth National Development Plan (1992-1997), now being completed, is the alleviation of poverty. Among the Eighth Plan's proposed targets for the year 2000 are the following: (a) reducing the TFR from 5.8 to 4.0; (b) increasing the average life expectancy to 65 years of age; (c) reducing the IMR from 107 to 50 per 1,000 live births; (d) reducing child mortality from 197 to 70 per 1,000; and (e) reducing the MMR from 8.5 to 4 per 1,000 live births. As these targets might be ambitious, the target-setting methodology and the targets themselves would be reviewed within the framework of the MCH/FP component of the programme. Other goals are regulating internal migration; raising the literacy rate, especially for females; and protecting the environment.

26. The main objectives of the proposed programme are presented in paragraph 3 above. The strategy for the UNFPA-supported programme would rest on an integrated and multi-faceted intervention, in which community participation and outreach would be emphasized. Parallel financing would be pursued with other donors and particularly with UNICEF in the MCH/FP, women, population and development and IEC sub-sectors. National and regional expertise would be increasingly drawn upon in programme implementation, including the private sector and NGOs. Specific strategies include: (a) setting different CPR targets based on population density and service accessibility; (b) promoting the use of temporary contraceptive methods while meeting the demand for permanent methods; (c) promoting delayed marriage and delay in first births; (d) giving the necessary impetus for integrated planning through population planning at the sectoral and national level and making it an integral part of development planning, policy analysis and policy-related research, as well as increasing national expertise in the population field; (e) raising awareness about the linkages between population and development, family planning and health as well as between population and

the environment; and (f) collaborating with other external assistance agencies in launching an integrated programme conducive to improving women's social, economic and health status.

Maternal and child health and family planning

27. In collaboration with other external assistance agencies, UNFPA would aim at improving family health, Safe Motherhood and child survival through fertility reduction and other health interventions. The strategy in the MCH/FP sub-sector underscores community participation. In collaboration with FPAN, the Contraceptive Retail Sales (CRS) Company and Nepal Red Cross, UNFPA would assist in community-based contraceptive distribution. Greater emphasis would be given to promoting temporary contraception through demand generation and a "cafeteria" approach for contraceptive supplies, under which users would be able to choose from a wide array of methods. Moreover, UNFPA would assist the Government in establishing family planning clinical and contraception training sites at selected hospitals, where MCH/FP units would also be strengthened. UNFPA would help provide specialized services in permanent and temporary contraception and quality assurance and would assist in establishing MCH/FP service delivery systems at proposed primary health care centres.

28. At district and village levels, outreach services would be strengthened by increasing the number of trained health personnel, including Female Community Health Volunteers, Mothers' Groups and traditional birth attendants. Efforts would be made to promote the entry of female workers into the cadre of the Village Health Workers. UNFPA would also help improve and expand outreach services focusing on safe delivery/Safe Motherhood, child survival, and prenatal and post-natal counselling. At the regional level, while consolidating achievements of the Regional Training Centres, UNFPA would further strengthen the institutionalization of basic training in MCH/FP. In collaboration with other external assistance agencies, UNFPA would assist in establishing and strengthening MCH/FP units in regional and district hospitals. At the national level, efforts would be geared to enable the Ministry of Health to develop a master plan for training health personnel. The development of management skills would be given greater emphasis. The Institute of Medicine is graduating 200 Auxiliary Health Workers (AHW) each year, too few to staff the new health sub-posts to be established. Hence, in cooperation with others, UNFPA would assist the Ministry of Health in training AHWs to staff these health sub-posts. The PRSD Mission estimated that approximately $1.2 million is needed annually to provide for the projected contraceptive needs of the country. In collaboration with others, UNFPA, through MIS training as well as training in logistics/planning and monitoring, would assist the Government's efforts to improve the distribution of essential MCH drugs and contraceptives to health posts and health sub-posts. Moreover, UNFPA would help the Government conduct feasibility studies in logistics and establish standards for community-based health service delivery. The Centre of Family Health at the Institute of Medicine would be supported to conduct applied research in MCH/FP for programming and policy purposes. UNFPA would provide a total amount of $11 million for this sector, of which $2.5 million would be sought from other sources, including multi-bilateral sources.

Information, education and communication

29. Regional and ethnic diversity, socio-cultural beliefs and Nepal's difficult terrain have all posed difficult challenges to IEC efforts. The limited use of existing MCH/FP services, misconceptions about contraceptive safety, and the lack of linkages between population and development issues have been partly due to the limited coverage of IEC interventions that were not based on socio-cultural research. The contrast between the "desired family size" of 3.5 children and the average total fertility of 5.6 as well as the willingness of 32 per cent of women of reproductive age to space births are telling indicators of unmet demand. The issue of

relatively high awareness (56 per cent of eligible couples know at least of one method), and the low contraceptive prevalence rate has yet to be addressed.

30. The proposed programme would support the formulation of a national IEC strategy and the full institutionalization of formal and non-formal population education. The programme strategy in IEC includes: (a) adopting a multimedia approach, emphasizing interpersonal communications; (b) segmenting audiences and expanding coverage to reach policy makers, planners, extension workers, school teachers, organized labour, etc.; (c) designing specific messages based on profiles of target audiences, taking regional diversity into account; (d) ensuring adequate population content in training materials; and (e) launching an IEC campaign to promote late marriage. All IEC activities would be based on behavioural and sociological research, or, at least, on a baseline survey of the audience. A particular target would be adolescent young girls, where there is ongoing coordination with the World Bank in reaching this crucial audience.

31. Given the exposure and important leadership role of primary school teachers in the community, a massive training programme would be conducted for them. Literacy and post-literacy activities would be used to disseminate information on population issues. Because UNICEF's plans include curriculum and textbook development at the formal and non-formal primary-school level, covering, inter alia, family planning education, UNFPA would support full institutionalization of population education at the secondary-school level. UNFPA would also support efforts of the Ministry of Education and Culture to coordinate, evaluate and monitor its population education programme.

32. While utilizing the public sector's facilities and network, the programme would also draw upon the private sector, as necessary, for the production and distribution of IEC materials. In cooperation with other assistance agencies, UNFPA would support the launching of a national street theatre programme to promote small family size, child-spacing, prevention of early marriages, Safe Motherhood, women's concerns and environmental protection. UNFPA would provide a total amount of $4.5 million for this sector, of which $500,000 would be sought from other sources, including multi-bilateral sources.

Data collection and analysis

33. To improve data availability, dissemination and utilization in order to plan, implement and evaluate population programmes, support would be given to the Central Bureau of Statistics to: (a) enhance its capability for population data analysis, including analysis of the 1991 census data, and for publication and dissemination of its results; and (b) expand its inter-censal survey capacity. UNFPA would provide a total amount of $800,000 for this sector, of which $300,000 would be sought from other sources, including multi-bilateral sources.

Population policy formulation

34. Although appropriate institutions have been established, there still exist serious gaps in: (a) integration of population and development planning at the central and sectoral planning levels; (b) policy-oriented research and policy analysis; (c) coordination of research activities and use of research results in population policy decisions; (d) translation of policies into effective and efficient plans of action; and (e) coordination of population programmes. To help overcome these constraints, the proposed programme would support the Population Division of the National Planning Commission in: (a) promoting the integration of population factors into sectoral planning; (b) coordinating, monitoring and evaluating population-related activities, including policy-oriented research, and enhancing its use in analysing population policy; (c) building

"population leadership" through the creation of greater awareness of population issues and forging commitment among line ministries. UNFPA would provide a total amount of $700,000 for this sector, of which $200,000 would be sought from other sources, including multi-bilateral sources.

Population dynamics

35. To help overcome the constraints mentioned in paragraph 20 and to train enough national experts in the population field, the proposed programme would continue to build up the capacity of the Central Department of Population Studies at Tribhuvan University to conduct research and training in population, including training for government officials; continue the degree programme in population studies; and play an advocacy role in population issues. UNFPA would provide a total amount of $700,000 for this sector, of which $200,000 would be sought from other sources, including multi-bilateral sources.

Women, population and development

36. Recognizing the role of the status of women in fertility reduction, the proposed population policy emphasizes increasing women's participation in education and literacy programmes and in off-farm employment, including self-employment schemes; giving priority to the recruitment of women as health service providers and trainees; and establishing a database on women. It also proposes legal reforms to eliminate discrimination against women and to enforce the legal age for marriage.

37. To help achieve these goals, the proposed programme aims at assisting the Government in undertaking an integrated programme with emphasis on education and need-based training linked to income-generating opportunities. This effort would be part of credit schemes to be supported in cooperation with various United Nations organizations and agencies as well as other organizations. UNFPA would also assist the Government's efforts to increase female enrolment and prevent drop-outs through non-monetary incentives for underprivileged girls; to promote female literacy programmes that include a population and MCH/FP content; and to include women's concerns in all programme components, with criteria for verification; to create conditions for Female Community Health Volunteers to have access to credit and literacy programmes; to address women's reproductive health through both clinical and non-clinical services as well as through effective prenatal and post-natal counselling; and to establish a data bank on women, population, development and the environment for decision-making and programming purposes. Given the multi-dimensional facets of women's developmental issues and concerns, joint intervention and/or parallel financing would be sought and promoted. UNFPA's input would focus on linking population components with women and development interventions. UNFPA would provide a total amount of $800,000 for this sector, of which $300,000 would be sought from other sources, including multi-bilateral sources.

Special programmes

38. Population and the environment. The fast-growing population has put stress on cultivated land and forest resources, perpetuating the cycle of poverty, declining agricultural yields, deforestation and environmental degradation. Knowledge about population and environmental linkages is inadequate. Therefore, support would be provided for research to: (a) identify specific linkages between population, the environment and development; (b) help determine the land's "carrying capacity" and the effects on migration trends; and (c) determine the particular effect of environmental degradation on the health and well-being of women. Furthermore, IEC activities would be designed to address the interrelationships between population and environmental issues. UNFPA would provide a total amount of $300,000 for this sector.

Programme reserve

39. An amount of $200,000 has been set aside as a reserve to cover unforeseen activities that may be developed within the context of the proposed programme.

Programme coordination

40. The central responsibility for programme coordination would rest with the National Planning Commission. Under its auspices and as the Secretariat of the National Committee on Population of Nepal, the Population Division will coordinate, monitor and evaluate population-related activities. Although the national population policy is expected to provide overall guidance and mandates to sectoral ministries, the Government would be encouraged to ensure the incorporation of population into sectoral planning. In close collaboration with the National Planning Commission, the Ministry of Finance would coordinate financial inputs for the population programme.

41. UNFPA would take on an active role in inter-agency coordination. The UNFPA field office would maintain close collaboration with both bilateral and multilateral assistance agencies that support population programmes in Nepal, and particularly with members of the Joint Consultative Group on Policy. The field office, in collaboration with others, would assist the Government in mobilizing external resources. Programme and other population-related information would be routinely exchanged with bilateral and multilateral agencies supporting Nepal's population and development efforts.

Programme management, monitoring and evaluation

42. Under the overall supervision and policy guidance of the UNFPA Representative, the programme would be managed and monitored at the field level by the Country Director. Whatever the mode of execution, UNFPA would make full use of available and appropriate national and regional technical backstopping capacities, complemented by the country programme technical support teams that will become operational in 1992 as part of the UNFPA successor support-cost arrangements approved by the Governing Council in decision 91/37.

43. The programme components to be formulated under the third cycle of assistance would have built-in monitoring, evaluation and technical review mechanisms. A mid-term country programme evaluation would be undertaken in 1994. To compile indicators of project progress and develop tools for verifying implementation and monitoring, private-sector consulting services and NGOs would be utilized on a trial basis.

Financial summary

44. As indicated in paragraph 1, UNFPA would provide assistance in the amount of $19 million over the five-year period 1992-1997, of which $15 million would be programmed from UNFPA's regular resources. UNFPA would seek to provide the balance of $4 million from a combination of UNFPA regular resources and other resources, including multi-bilateral resources, when and to the extent such additional resources become available. The following table shows how the programme areas would accommodate these two levels of funding:

	UNFPA regular resources $	Other resources $	Total $
Maternal and child health and family planning	8,500,000	2,500,000	11,000,000
Information, education and communication	4,000,000	500,000	4,500,000
Data collection and analysis	500,000	300,000	800,000
Population policy formulation	500,000	200,000	700,000
Population dynamics	500,000	200,000	700,000
Women, population and development	500,000	300,000	800,000
Special programmes	300,000	--	300,000
Programme reserve	200,000	--	200,000
TOTAL	15,000,000	4,000,000	19,000,000

V. RECOMMENDATION

45. The Executive Director recommends that the Governing Council:

(a) Approve the programme for Nepal in the amount of $19 million for the five-year period 1992-1997;

(b) Authorize the Executive Director to programme, subject to the availability of funds, an amount of $15 million from UNFPA's regular resources, over the period 1992-1997;

(c) Further authorize the Executive Director to seek to provide the balance of $4 million of the approved programme from a combination of UNFPA regular resources and other resources, including multi-bilateral resources, when and to the extent such additional resources from any of the above sources become available;

(d) Authorize the Executive Director to allocate the funds and make appropriate arrangements with the Government of Nepal and with the executing agencies.